



# Los Angeles County Response to the Sexually Transmitted Infection Crisis

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Board of Supervisors Brief Update

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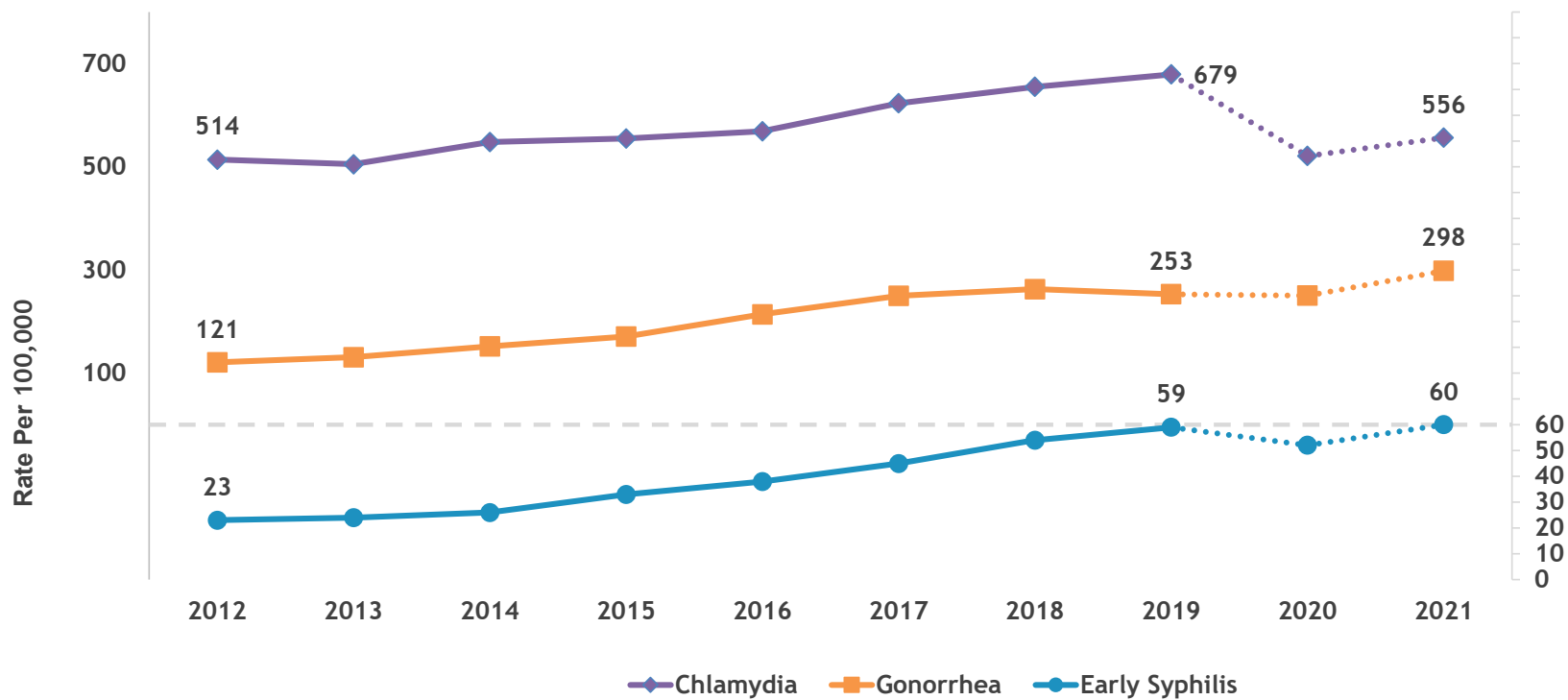


## Overview

- I. Overview of LA County STD Morbidity Trends
- II. Elements of Current STD Prevention and Control Response
- III. STD Control in the Context of Social Determinants of Health and Growing Public Health Crises
- IV. Current STD Funding Revenue and Program Investments
- V. Summary of Key Points and Next Steps

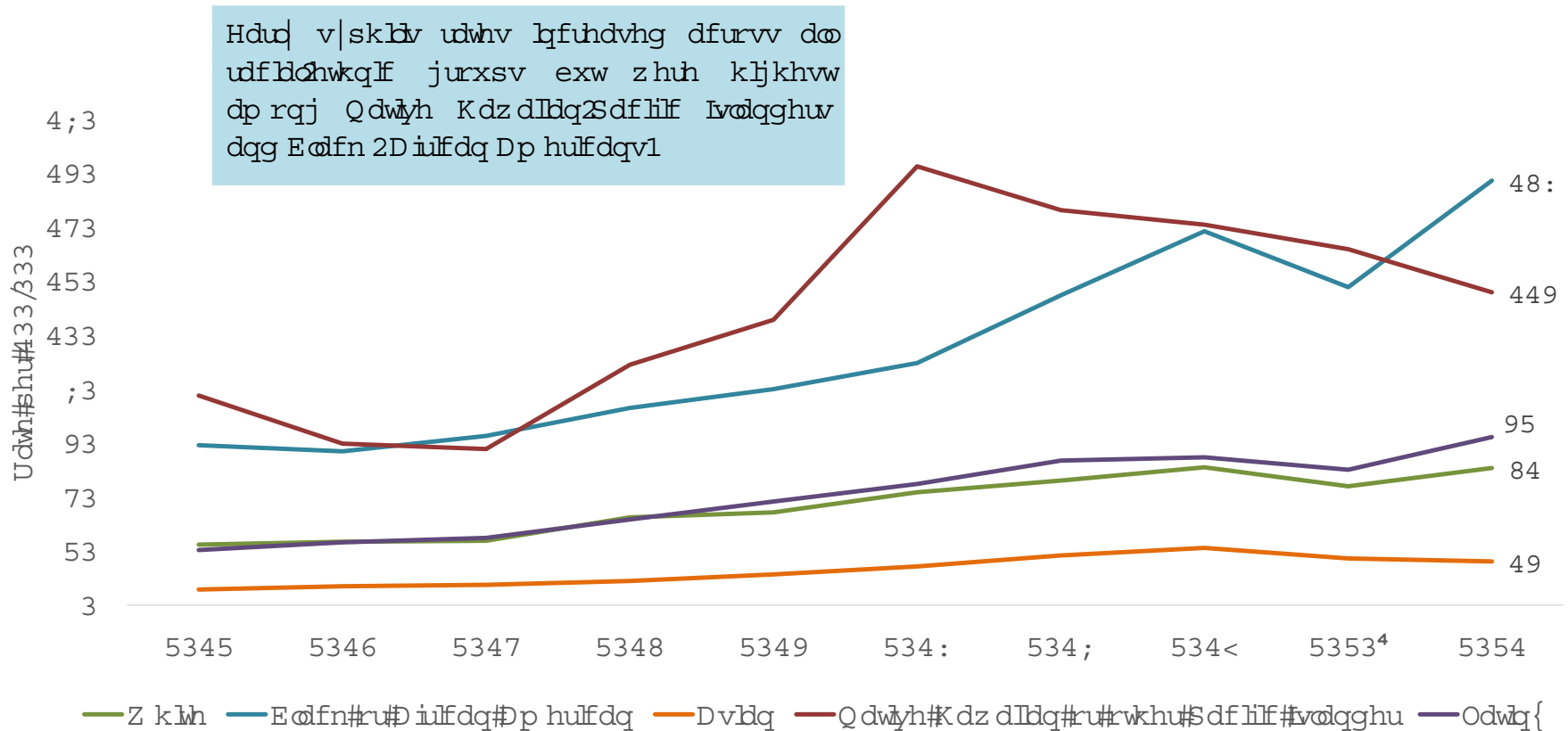


## Trends in Sexually Transmitted Diseases, Los Angeles County, 2012-2021



<sup>1</sup> Data as of 06/05/2022. Early syphilis includes all cases staged as primary, secondary, or early non-primary non-secondary (previously early latent); cases from Long Beach and Pasadena are excluded. 2020 and 2021 data are provisional due to reporting delay. 2021 rates are calculated using 2020 population estimates as a proxy for 2021

# Early Syphilis<sup>1</sup> Rates by Race/Ethnicity<sup>2</sup> Los Angeles County, 2012-2021<sup>3</sup>



1. Early syphilis includes all cases staged as primary, secondary or early non-primary non-secondary (early latent).
2. Note that 2013 and 2014 rates for Native Hawaiians/Pacific Islanders are unstable due to small numbers and should be interpreted with caution. AIAN rates were not included in this figure due to small numbers.
3. LAC data as of March 23, 2023. Data from the Cities of Long Beach and Pasadena are not included.
4. Note that the number of reported STDs in 2020 decreased as a result of decreased STD screening and increased use of telemedicine during the COVID-19 Stay at Home Health Officer Order.

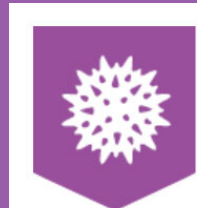
Sources: Division of HIV and STD Programs;

# Current LA County STD Prevention and Control Strategies



## Diagnose

- Range of STD Screening, Diagnosis Services
- School Wellbeing Center-based Services
- Syphilis Screening as part of Prenatal Care and During Delivery
- Testing via Emergency Departments
- Testing via DMH Clinics



## Treat

- STD Treatment Services as part of Sx & Dx
- Antibiotic Treatment Verification
- Bicillin Delivery Program for CS Control
- Intensive Case Management for Pregnant Persons with Syphilis
- Street Medicine efforts
- Expedited Partner Therapy



## Prevent

- Provider Outreach and Education
- Clinical Provider Education and Training
- Condom Distribution
- School-Based Sexual Health Education
- Expedited Partner Therapy (EPT)
- Biomedical Prevention (Doxy-PEP)



## Respond

- Partner Elicitation and Partner Notification through Public Health Investigators
- Community Embedded DIS
- Data to Action Efforts
- Health Plan Engagement
- FQHC Engagement

## Cross Cutting Strategies

- Policy and Leadership
- Promoting Gay/Bi/MSM Holistic Health
- Community Engagement Programs (South LA)
- Implicit Bias & Medical Mistrust Training
- Media Campaigns
- HIV, Syphilis, Meth Use Disorder Syndemic Programming



## Relevant Local, State and Federal Level Policy and Structural Updates

- Increased Emphasis on Syndemics
  - Substance Use and Ongoing Impact on the Public's Health
  - Expanded Focus on STD Crisis (STI Coalition, Health Plans, CA DHHS)
  - Ending the HIV Epidemic Initiative as a Planning and Implementation Model
  - Alarming Congenital Syphilis Rates and Projections
  - New and ongoing response to Mpox outbreak
  - Increased rates among persons experiencing homelessness and mental illness
- Political and Policy Landscape
  - Cuts and Threats at Federal Level (e.g., rescission of CDC DIS Infrastructure Funds)
  - Challenges at State Level (e.g., AB 1645 vetoed; Medicaid reimbursement rates remain low)
  - Increased Attention and Expanded Support at Local Level



## Current STD Revenue

Funding Source	Grant	Pays For	Years of Funding	Annual Amount
Centers for Disease Control and Prevention (CDC)	Strengthening STD Prevention and Control for Health Departments (STD PCHD)	DPH core program costs; only 10% allowed for sub-contractors	Annual	\$3,356,049
	Gonococcal Isolate Surveillance Project (GISP)	Targeted surveillance project	Annual	\$15,000
California Department Public Health (CDPH)	STD Prevention and Collaboration Grant	DPH core program costs; community-based organizations via contracts	Annual	\$1,952,013
	Core STD Program Management Grant	Community-based services via contracts	Annual	\$547,050
	Syphilis Outbreak Strategy (SOS) Grant	Syphilis among women and congenital syphilis prevention and control	FY 2022-2025	\$3,957,227
	Future of Public Health Fund	Community-Embedded Disease Investigation Specialists (CEDIS)	FY 2022-2024	\$997,500
County of Los Angeles	Tobacco Settlement Fund	Community-based services via contracts	FY 2021-2025	\$2,500,000
	Net County Cost*	DPH core program costs; community-based services via contracts	Annual	\$13,018,309
	Tobacco Settlement Fund	DPH core program costs; community-based services via contracts	FY 2023-2025	\$5,000,000
	<i>Note: DIS Infrastructure for COVID, HIV, STD, TB and Hepatitis, \$6,598,516/year, resources suspended prematurely; amount not included.</i>		<b>TOTAL</b>	<b>\$31,343,148</b>

\*Does not include NCC for DPH Public Health Clinics' STD related investments.



## Current and Planned Clinical CBO-based STD Investments and Resource Utilization Rate

- Current annualized contractual obligation: \$8,092,088
  - Covers: Screening, Diagnosis & Treatment Services, Sexual health express clinics, and HIV/STD Testing in Commercial Sex Venues
  - Percent of Funds Used in Calendar Year 2022: \$5,754,151 (71%)
- Planned Additional Annualized Contractual Obligation: \$3,247,500
  - For: Increasing capacity and optimizing screening, diagnosis and treatment services, CEDIS program

**TOTAL Current + Planned Additional Annualized  
Contracted Obligation for Clinical Services =  
\$11,339,588**





## Two-Year Plan for Newly Allocated \$10M in LA County STD Resources

Activity	Amount
<b>Community-Based Activities</b>	
STD Control through Community-Based Clinical Providers	\$4,500,000
Syphilis and Congenital Syphilis Control through Emergency Departments, Perinatal Care Providers and Birthing Hospitals	\$1,600,000
STD Awareness and Education (syphilis and Doxy-PEP)	\$600,000
STD Control through Expanded Direct Client Services (test kits, condoms)	\$600,000
<b>DPH-led Activities</b>	
Enhanced STD Surveillance and Data Analysis (epidemiologists, data platforms)	\$1,100,000
Youth Peer Education at School Well-Being Centers	\$800,000
STD Control through Public Health Sexual Health Clinics	\$800,000
<b>TOTAL</b>	<b>\$10,000,000</b> <b>(\$5,000,000/year for 2 years)</b>



## Innovations From the Field

- Biomedical Prevention – Doxy-PEP
- Bicillin Delivery Program
- Rapid Syphilis Testing
- Street Medicine
- Comprehensive Congenital Syphilis Plan
- Telehealth for Sexual Health Services
- Contingency Management for Methamphetamine Use
- Health Fairs for Women and People Experiencing Homelessness

